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PATENT

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant : Khairkhahan et al.  
Appl. No. : 10/033,371  
Filed : October 19, 2001  
For : METHOD OF IMPLANTING A  
DEVICE IN THE LEFT ATRIAL  
APPENDAGE  
Examiner : Glenn Dawson  
Group Art Unit : 3761

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 23, 2004

(Date)

Sabing H. Lee, Reg. No. 43,745

**AMENDMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed May 5, 2004, please amend the above-identified application as indicated below.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Summary of Interview** begins on page 9 of this paper.

**Remarks/Arguments** begin on page 10 of this paper.

07/26/2004 EABUBAK1 00000125 10033371

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172.00 OP

## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Khairkhahan, et al.  
 App. No. : 10/033,371  
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 Sabing H. Lee, Reg. No. 43,745

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

(X) Amendment in 11 pages.


The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	39 - 50 = 0	1202 (\$18)	0 x 18 =	\$0
Independent Claims	9 - 7 = 2	1201 (\$86)	2 x 86 =	\$172
			<b>TOTAL FEE DUE</b>	<b>\$172</b>

(X) A check in the amount of \$172 is enclosed.

(X) Return prepaid postcard.

(X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

  
 Sabing H. Lee  
 Registration No. 43,745  
 Attorney of Record  
 Customer No. 20,995  
 (949) 760-0404